CLAIMS ONLY

Application Number	Filing Date
10506421	

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*						*					
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend
1	1						51							101				
2		1					52							102				
3		1					53							103				
4		1					54							104				
5		1					55							105				
6		1					56							106				
7		1					57							107				
8		1					58							108				
9		1					59							109				
10	1						60							110				
11		1					61							111				
12		1					62							112				
13							63							113				
14							64							114				
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18							68							118				
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37							87							137				
38							88							138				
39							89							139				
40							90							140				
41							91							141				
42							92							142				
43							93							143				
44							94							144				
45							95							145				
46							96							146				
47							97							147				
48							98							148				
49							99							149				
50							100							150				
Total Indep	2						Total Indep							Total Indep				
Total Depend	10						Total Depend							Total Depend				
Total Claims	12						Total Claims							Total Claims				